

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

for Patent Application of

Scot Kevin HUBER et al.

Application No.: 10/612,269

Filing Date:

July 3, 2003

Title: CONTROL OF ARTHROPODS IN ANIMALS

Group Art Unit: 1626

Examiner: Kamal A. Saeed

Confirmation No.: 4089

## AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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c	ir.	

LIIC	nosed is a reply for the above-identified patent application.					
X	A Petition for Extension of Time is also enclosed.					
Terminal Disclaimer(s) and the \$\infty\$\$ \$55.00 (2814) \$\infty\$\$ \$110.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.						
	Also enclosed is/are					
	Small entity status is hereby claimed.					
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the   ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).					
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.					
	Applicant(s) previously submitted					
	on					
	for which continued examination is requested.					
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.					
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.					

Attorney Docket No. 022650-727

Application No. \_\_10/612,269

X	No additional claim fee is required.
	An additional claim fee is required, and is calculated as shown below.

		A	MEN	DE	ED CLAIMS		
	No. of Claims	Highes of Cla Previo Paid	aims ously		Extra Claims	Rate	Additional Fee
Total Claims	41	MINUS	48	II	0	x \$18.00 (1202) =	\$ 0.00
Independent Claims	4	MINUS	4	11	0	x \$88.00 (1201) =	\$ 0.00
If Amendment adds m	nultiple depen	dent claim	s, add	1 \$	300.00 (1203)		
Total Claim Amendme	ent Fee						\$ 0.00
Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee			\$ 0.00				
OTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT \$				\$ 0.00			

A check in the amount	of is enclosed for the fee due.
Charge	to Deposit Account No. 02-4800.
Charge	to credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: October 28, 2004

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